

USM-285 is a 5-part form. Fill out the form and print 5 copies. Sign as needed and route as specified below.

U.S. Department of Justice
United States Marshals Service**PROCESS RECEIPT AND RETURN**
See "Instructions for Service of Process by U.S. Marshal"

PLAINTIFF United States of America	COURT CASE NUMBER 18-00403
DEFENDANT SEAN I. COOK	TYPE OF PROCESS Service

**SERVE
AT**

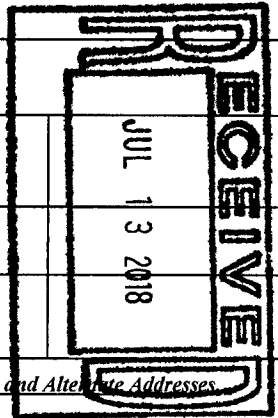
NAME OF INDIVIDUAL, COMPANY, CORPORATION ETC. TO SERVE OR DESCRIPTION OF PROPERTY TO SEIZE OR CONDEMN

SEAN I. COOK

ADDRESS (Street or RFD, Apartment No., City, State and ZIP code)

226 Wickersham Road Oxford, PA 19363

SEND NOTICE OF SERVICE COPY OF REQUESTER AT NAME AND ADDRESS BELOW

KML Law Group, P.C.
701 Market St.
Suite 5000
Philadelphia, PA 19106Number of process to be
served with this Form 285Number of parties to be
served in this caseCheck for service
on U.S.A.

SPECIAL INSTRUCTIONS OR OTHER INFORMATION THAT WILL ASSIST IN EXPEDITING SERVICE (Include Business and Alternate Addresses, All Telephone Numbers and Estimated Times Available for Service)

The Defendant is incarcerated at Chester County Prison located at 501 South Wawaset Road, West Chester, PA 19382-6776. Please serve the Defendant y July 27, 2018.

Signature of Attorney other Originator requesting service behalf of

☒ PLAINTIFF
☐ DEFENDANT

TELEPHONE NUMBER

215-627-1322

DATE

7/13/18

SPACE BELOW FOR USE OF U.S. MARSHAL ONLY-- DO NOT WRITE BELOW THIS LINE

I acknowledge receipt for the total number of process indicated. (Sign only for USM 285 if more than one USM 285 is submitted)	Total Process 1	District of Origin No. 600	District to Serve No. 600	Signature of Authorized USMS Deputy or Clerk <i>[Signature]</i>	Date 7/13/18
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I hereby certify and return that I ☐ have personally served, ☐ have legal evidence of service, ☒ have executed as shown in "Remarks", the process described on the individual, company, corporation, etc., at the address shown above on the on the individual, company, corporation, etc. shown at the address inserted below.☒ I hereby certify and return that I am unable to locate the individual, company, corporation, etc. named above (See remarks below)

Name and title of individual served (if not shown above)

Address (complete only different than shown above)

☐ A person of suitable age and discretion then residing in defendant's usual place of abodeDate _____ Time _____
☐ am
☐ pm

Signature of U.S. Marshal or Deputy

Service Fee	Total Mileage Charges including endeavors	Forwarding Fee	Total Charges	Advance Deposits	Amount owed to U.S. Marshal* or (Amount of Refund*)
					\$0.00

REMARKS: 7-25-2018 SPOKE TO LOUISA PEREZ, SUPERINTENDENT'S OFFICE They have NO INMATE in FACILIS by name SEAN I. COOK only COOK in FACILIS is A KADEEM COOK WITHOUT IDENTIFICATION MARK

PRINT 5 COPIES:

1. CLERK OF THE COURT TO POSITIVELY ID CORRECT PERSON TO SERVE
2. USMS RECORD
3. NOTICE OF SERVICE
4. BILLING STATEMENT*: To be returned to the U.S. Marshal with payment, if any amount is owed. Please remit promptly payable to U.S. Marshal.
5. ACKNOWLEDGMENT OF RECEIPT

PRIOR EDITIONS MAY BE USED